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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐

Declaration
Submitted
With Initial
Filing

OR

☒

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket
Number

API-03-13-PCT-US

First Named Inventor

Mark Parrington

COMPLETE IF KNOWN

Application Number

10/575,060

Filing Date

10/06/2004

Art Unit

TBD

Examiner Name

TBD

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MODIFIED CEA/B7 VECTOR

(Title of the Invention)

the specification of which

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is attached hereto

OR

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was filed on (MM/DD/YYYY)

10/06/2004

as United States Application Number or PCT International

Application Number

PCT/US04/33145

and was amended on (MM/DD/YYYY)

04/06/2006

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/US04/33145	PCT	10/06/2004	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐

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[Page 1 of 3]

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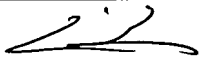
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> The address associated with Customer Number:	65626	OR <input type="checkbox"/> Correspondence address below
Name				
Address				
City		State		ZIP
Country		Telephone		Email
<p style="text-align: center;">WARNING:</p> <p>Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.</p> <p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>				
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname	
Mark			Parrington	
Inventor's Signature <i>Mark Parrington</i>				Date <i>March 21, 2007</i>
Residence: City Bradford	State Ontario	Country Canada	Citizenship Canadian	
Mailing Address 214 Melbourne Drive				
City Bradford	State Ontario	Zip L3Z 2Y8	Country Canada	
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.				

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 2 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Linong		Zhang	
Inventor's Signature 		Date <u>Mar. 21, 07</u>	
Concord Residence: City	Ontario State	Canada Country	Canadian Citizenship
133 Novella Road			
Mailing Address			
Concord City	Ontario State	L4K 5K6 Zip	Canada Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Rovinski		Benjamin	
Inventor's Signature		Date	
Thornhill Residence: City	Ontario State	Canada Country	Canadian Citizenship
40 Lunau Lane			
Mailing Address			
Thornhill City	Ontario State	L3T 5N2 Zip	Canada Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
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Mark Parrington

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Application Number

10/575,060

Filing Date

October 6, 2004

Art Unit

Examiner Name

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				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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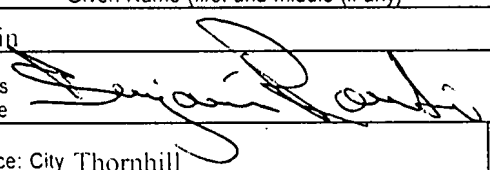
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number 656 2-6 OR <input type="checkbox"/> Correspondence address below			
Name Patrick J. Halloran, Aventis Pasteur, Inc.			
Address Intellectual Property, Knerr Bldg. One Discovery Drive			
City Swiftwater		State PA	ZIP 18370
Country USA	Telephone 570-839-5446	Fax 570-895-2702	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Mark		Family Name or Surname Parrington	
Inventor's Signature			Date
Residence: City Bradford	State Ontario	Country CA	Citizenship CA
Mailing Address 214 Melbourne Dr.			
City Bradford	State Ontario	ZIP L3Z 2Y8	Country CA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Linong		Family Name or Surname Zhang	
Inventor's Signature			Date
Residence: City Concord	State Ontario	Country CA	Citizenship CA
Mailing Address 133 Novella Road			
City Concord	State Ontario	ZIP L4K 5K6	Country CA
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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Supplemental SheetPage 3 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Benjamin		Rovinski	
Inventor's Signature 		Date <u>March 30, 2007</u>	
Residence: City Thornhill	State Ontario	Country CA	Citizenship CA
Mailing Address 40 Lunau Lane			
Mailing Address			
City Thornhill	State ON	Zip L3T 5N2	CA Country CA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature			
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City Pommiers	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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04/06/2006

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Customer Number:

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OR

Correspondence
address below

Name

Sanofi Pasteur, Inc.

Address

Discovery Drive

City

Swiftwater

State

PA

ZIP

18370

Country

United States of America

Telephone

610-984-4751

Email

pat@pathalloran.com

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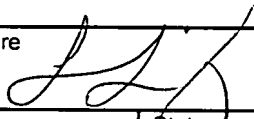
Given Name (first and middle [if any])

Linda

Family Name or Surname

Gritz

Inventor's Signature



Date

28 Mar 2007

Residence: City

Somerville

State

MA

Country

United States of America

Citizenship

United States of America

Mailing Address

3 Emerson Street

City

Somerville

State

MA

Zip

02143

Country

United States of America



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Swiftwater

State

PA

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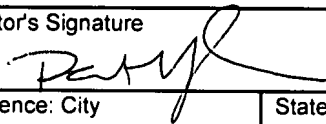
Given Name (first and middle (if any))

Patricia

Family Name or Surname

Greenhalgh

Inventor's Signature



Date

2-17-07

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Additional inventors or a legal representative are being named on the

supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.